

The Arkansas 4-H Foundation, Inc.

C.A. Vines Arkansas 4-H Center Scholarship Application

Last Name: _____ First Name: _____

Address: _____

City: _____ Zip: _____ County: _____

1. To which camp are you applying for an Arkansas 4-H Foundation Scholarship? If you are applying for a scholarship to more than one camp, please rank the camps in order of preference by placing 1 in the box to the left of your first choice, 2 in the box to the left of your second choice, etc.

Date	Event	Fee	Scholarship Value	Number of Scholarships
<input type="checkbox"/> June	Teen Leader Conference	\$160	\$80	8
<input type="checkbox"/> June	Forestry Wildlife Camp	\$150	\$75	4
<input type="checkbox"/> July 7-9	Junior Camp I	\$115	\$55	8
<input type="checkbox"/> July 14-16	Junior Camp II	\$115	\$55	8
<input type="checkbox"/> July 17-18	Cloverbud	\$75	\$35	4
<input type="checkbox"/> July 7-9	Adventure & Challenge Camp I	\$125	\$65	4
<input type="checkbox"/> July 14-16	Adventure & Challenge Camp II	\$125	\$65	4
<input type="checkbox"/> July	Equine Camp	\$300	\$100	1
<input type="checkbox"/> July	High Adventure-Backpacker Training	\$50	\$25	3

2. How do you plan to use the knowledge you obtain from camp with your local 4-H club? (No more than one paragraph)

3. What does 4-H mean to you? (No more than a paragraph)

4. Why do you need this scholarship?

* Scholarships are awarded based on economic need. The C.A. Vines Arkansas 4-H Center Scholarship is for community club 4-H -members who have an economic hardship.

Submitted by: _____ Date _____

Applicant
Signature: _____

Parent
Signature: _____

OFFICE USE ONLY

Date Received _____

Approved: Yes _____ No _____ Approved by: _____

Scholarship Amount _____